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ABSTRACT

This guide presents strategies used in Pain Management and Stress Reduction workshops for helping the elderly cope with stress and chronic pain. Client evaluations of the workshops are given along with an analysis of the clients' presenting problems. Coping strategies described include: the relaxation response, imagery, daily logs, journal techniques, cognitive group discussion of dysfunctional thinking, values clarification, hugging, groupwork, and setting personally meaningful goals and putting them into action. Applications and analysis of the relaxation response are detailed most thoroughly. Appendices include three handouts: (1) suggested readings for pain management workshops; (2) step-by-step instructions for performing the relaxation response; and (3) pain management workshop topics and assignments. (ABB)

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1985 APA CONVENTION: SYMPOSIUM ON NEW DIRECTIONS FOR TREATING THE ELDERLY

"Strategies For Coping with Stress and Chronic Pain",
presented by Genevieve Rogge Meyer, Ph.D. Aug. 23, 1985.

The strategies for coping with Stress and Chronic Pain that I will discuss have been developed and refined during the small Group Workshops I have been conducting since 1977 at the Senior Health and Peer Counseling Center, in my capacity as Consulting Psychologist. The SHPCC*, located in Santa Monica, is a free Preventive Health Center for Older Persons, offering a broad spectrum of services, such as:

Health Screening	Health Education	Peer Counseling
Annual Physical Exams	Stress	72 Active Volunteers
B. P. Monitoring	Pain	Most frequent presenting problems: depression, (plus loneliness and alienation)
Glaucoma & Cataract Screening	Memory	
Hearing Tests	Exercise	
RX Education	Nutrition	
Older Women's Health Care	Women's Issues: Sexuality	
	Blood Pressure	
	Arthritis Self-Help	

ALSO: Community Outreach and Education

Let me briefly describe the client population I've been working with, before getting into the strategies that have proved helpful in coping with Stress and Chronic Pain. While the 6 week long Stress groups were started in 1977, it wasn't until the addition of the 10 week Pain Management Program in 1980 that regular record-keeping and EVALUATION of groups was begun.

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Evaluations have been obtained on 79% of the 255 PAIN MANAGEMENT WORKSHOP clients seen since 1980, and on 80% of the 380 STRESS REDUCTION WORKSHOP clients seen since 1982 (F.N.I.). All reported benefits such as: "feeling more able to cope","reduced pain", "feeling calmer", "lower blood pressure", "greater physical mobility", "an increase in Life-Enhancing activities", "improved sleep and/or nutrition patterns", "increased stamina for daily chores and errands", etc.

The age range was 55 to 90 years for both Stress and Pain Groups with a median age of 67 for Stress Groups and 69 for Pain Groups. The Stress group client evaluators were 13% male and 87% female, while the figures for Pain groups were very similar (89% female and 11% male). In the Pain groups, the median number of years of chronic pain on a daily basis was six years, with a range of 1 to 40 plus years. The primary cause of pain varied from arthritis (the single most frequent cause), to various back disorders, GI problems, migraine headaches, and continuing pain after surgery, accidents, chemotherapy, etc. In the Stress Groups, many clients reported emotional symptoms (e.g., insomnia, tenseness, worry, anxiety), though the majority had physical symptoms (e.g., hypertension, head, neck or back aches, assorted digestive/elimination problems, etc.).

The client evaluations, along with follow-up data on a small random sample of Pain Group Graduates who completed their groups at least 3½ to 5 years ago (FN#2), have proved very useful in showing which strategies were most effective.

F.N.#1 Twenty-nine Pain Groups have been conducted since 1980 and all were evaluated and included in this sample. Because the Stress Group Evaluation was not begun until 1982, the 22 Groups completed in 1980 and 1981 are not included. The 37 Stress Groups completed since 1982 were evaluated and have been included.

F.N.#2 Four people each were randomly selected from four groups (also randomly selected) from the earliest groups completed (ending date from 3½ to 5 years ago). Of these 16, four people could not be located, which leaves a high contact rate of 75% and a sample of 12 (from the original 16) people, who responded to the follow-up interview questions.

I'll spend the major portion of my time on those strategies for coping with pain that really work, and then touch on two other areas:

(1) The importance of group work with older adults. (The ideal group is 8 to 10 people, though it can go up to 12 in size.)

(2) The necessity to go beyond just reducing stress and/or chronic pain, and to help clients find outlets for expressing their Growth Needs (as defined by Maslow). This enhances their feelings of self worth and of productive or useful engagement in life.

And Now to the Strategies:

The single most important strategy involves learning to activate the body's Relaxation Response, as shown by client's reports of beneficial physical, emotional and mental changes they have actually experienced. In the follow-up data on Pain Group Graduates (after an interval of 3-1/2 to 5 years), 83% said they were still using the Relaxation Response on a regular basis (58% on a daily basis and 25% at least weekly).

The Relaxation Response, as defined by Dr.Herbert Benson (whose extensive research is still being carried on at Harvard Medical School), refers to "a coordinated set of bodily changes" that counteracts the effects of what is popularly called the "FIGHT OR FLIGHT" response, which is the dominant response in STRESS.

One of your Hand-Outs (#2) describes the Relaxation Response as I have adapted it from Dr.Benson. The reading list Hand-Out (#1) for the Pain group shows at the bottom which three references are most useful for clients who want a simple and accurate account of what goes on in their bodies during stress.

Rather than spend precious time reviewing the psychophysiology of stress, let me share with you the analogy that works well with clients. Simply COMPARE THE ACTION OF THE AUTONOMIC NERVOUS SYSTEM to the action of a teeter-totter. The ANS controls such structures as the heart, lungs, blood vessels and endocrine glands, etc., through its 2 complementary subdivisions: the SYMPATHETIC and the PARA SYMPATHETIC Nervous Systems. When a demand for action is placed with us, the Sympathetic NS comes into play leading to increased heart, respiratory and metabolic rates, stepped-up hormonal activity, and a 300-4—% increase in blood flow to the skeletal muscles, etc., all of which is to prepare us for action. This is the "fight or flight" (F/F) response.

When the need for action is over, the other half of the teeter-totter, the parasympathetic nervous system, becomes dominant and reverses the effects of high sympathetic nervous system arousal. THIS IS THE RELAXATION RESPONSE.

Normally, the two opposing SUB-SYSTEMS of the ANS keeps some kind of balance in the body -- with the parasympathetic nervous system generally keeping body systems operating at a steady, normal rate (homeostasis).

Of course, under chronic STRESS (i.e. prolonged or inappropriate arousal of the sympathetic nervous system) we begin to see symptoms ranging from a pervasive feeling of uneasiness, even anxiety, to insomnia, irritability, G. I. problems, back-neck-and headaches, intensification of chronic pain, and the list can go on and on.

It takes 2 or 3 sessions (groups meet weekly) for clients to get into the rhythm of effective daily practice. The early sessions emphasize the need for a "passive" or "let-it-happen" attitude. Also clients are guided to adapt the method to fit their own individual style (e.g. time of day, position, and choice of centering word); and to help them get beyond the

common hurdles of giving in to distracting thoughts and/or judging their performance instead of letting their skill level grow naturally. While they start out using a Relaxation Tape, they gradually become able to elicit the Relaxation Response at will (—e.g., in any stressful situation (such as dental, visits, freeway driving, family arguments, etc.) ONCE THIS STAGE IS REACHED, practicing the Relaxation Response is no longer a chore. Clients begin to know they have the power to change what goes on in their bodies. This is a great antidote to the "helpless-hopeless" syndrome which, in varying degrees, frequently besets these older clients.

At this point the group leader can use most of the session time to get into the more familiar psychological strategies. Your third hand-out, the Pain Management Workshop Outline, lists most of them and the sequence in which these are best presented.

The next strategy is IMAGERY. In STRESS groups, mental rehearsal and desensitization types of imagery are useful. In the follow-up research on PAIN GROUPS, 66% were still using some type of imagery, Overall, the responses showed: 33%: not using any imagery

33%: Nature scene imagery to enhance relaxation used occasionally, on an "as needed" basis.

33%: Specific Release of Pain Imagery was the only type to hold up (e.g. milk bath, Torso massage, Riding a horse, soaking in jacuzzi, riding in a beloved Van). N.B. the more poetic or metaphorical imagery (e.g. Magnet to draw out prickly needles of pain sensations) may work at the time -- BUT more concrete images, that the body can easily recognize and respond to, are the ones that keep working, and then are a POWERFUL tool indeed!

I only have time to mention briefly some of the others.

DAILY LOGS These are very useful behavioral strategies. As clients begin to identify pain-triggering situations, they change them.

JOURNAL TECHNIQUES Only a few people can "get with this strategy". However, it is helpful to leave it in as an option for those who find it difficult to do Daily Logs.

COGNITIVE GROUP DISCUSSION OF DYSFUNCTIONAL THINKING is very valuable, and shouldbe used as often as time permits.

VALUES CLARIFICATION strategies are very helpful in setting Wellness Goals.

HUGGING While this may not be called a true strategy, clients really like to end group sessions by hugging each other.

IMPORTANCE OF GROUP WORK FOR OLDER ADULTS

1) Meets need for socialization. (Of course clients can also be seen individually as well -- and some Stress & Pain clients are seen by Peer Counselors).

2) In the follow-up research: 67% said the one thing they remembered most about the PMW was the "friendly group" --"hugging", "being with people who cared", etc.

3) Especially in pain groups, the group setting is the first place *in* some time where clients don"t feel "less than", and feelings of "not wanting to live", or of SHAME since "can't keep up with others", can be shared.

4) GENERATES AN ENERGY AND COMMITMENT the counselor can't get in the "one-to-one" situation.

NEED FOR SETTING PERSONALLY MEANINGFUL GOALS AND PUTTING THEM INTO ACTION

1) Just reducing Pain and/or Stress is not enough! Many clients also have unfulfilled needs for useful activity and more socialization. If they are not helped in their search for a fuller social life and for productive, personally meaningful activities, then chronic pain and stress are likely to recur.

2) AS A NATION, we need to utilize more effectively the increasing number of people in the older age groups. THEY ARE INDEED AN UNTAPPED NATIONAL RESOURCE.

References

On page 3, for Maslow, see: Goble, F. The Third Force: The Psychology of Abraham Maslow. New York, Pocket Books, 1971.

On page 3, for Benson, see: Benson, H. The Relaxation Repponse. New York, Avon, 1975.

For a more extensive reading list, see attached Hand-Out #1.

SUGGESTED READINGS FOR PAIN MANAGEMENT WORKSHOP

Bailey, Covert. Fit or Fat Noughton-Mifflin (paperback), 1977

X Benson, Herbert. The Relaxation Response Avon Books (paperback), 1975

Benson, Herbert. The Mind/Body Effect Simon & Schuster 1979

Benson, Herbert. Beyond The Relaxation Response Times Books, 1984

Bresler, David. Free Yourself From Pain Simon & Schuster, 1979

Brown, Barbara. New Mind, New Body Bantam Books (paperback) 1974

Carlisle, Norman & Madelyn. Where to Live for your Health Harcourt, Brace, Jovanovich, 1980

Cousins, Norman. The Healing Heart Norton & Co., 1979

Cousins, Norman. Anatomy of an Illness Norton & Co. 1979

Ferguson, Marilyn. The Aquarian Conspiracy Noughton-Mifflin (paperback), 1980

Leonard, John; Hofer, J.L.; and Pritikin, N. Live Longer Now Charter Books (paperback), 1974

Pelletier, Kenneth R. Mind as Healer, Mind as Slayer Delta Books (paperback), 1977

Samuels, Kenneth R. Seeing with the Mind's Eye Random House, 1975

* Selye, Hans. Stress Without Distress Signet Books (paperback), 1974

Simonton, O. Carl; Matthews-Simonton, Stephanie; and Creighton, James Getting Well Again J.P. Tarcher, Inc. 1978 (Read the chapter on "Managing Pain.")

* Time Magazine (June 6, 1983): Cover Story on Stress.

Ulene, Art. Feeling Fine J. P. Tarcher, Inc. 1977

*NOTE: Only these three references are given to STRESS GROUP participants. ALSO, the Relaxation Response is practiced twice daily in the Stress Groups, compared to three times daily in the Pain Group.

HAND-OUT #1

SENIOR HEALTH AND PEER COUNSELING CENTER

PAIN MANAGEMENT WORKSHOP
Dr. Genevieve R. Meyer

••• THE RELAXATION RESPONSE •••

(adapted from Dr. Herbert Benson)

1. Sit or rest quietly in a comfortable position--as comfortable as you can make it for yourself. (If you choose lying on the bed or floor, keep a pillow under your knees or raise knees with feet on floor or bed.)

2. Close your eyes.

3. Relax your muscles, starting with feet and travel up to your face.

4. Breathe naturally and inhale through nose; then, as you exhale, repeat the letter "M" or the number "1" or a word or phrase of your choice.

5. Continue for 10-20 minutes. When you finish, rest quietly (with eyes open) for a bit before standing.

6. Don't worry about being a success at getting deep relaxation, and don't dwell on distracting thoughts. As they occur, ignore them and return to repeating (either outloud or silently) the number, letter, word or phrase that works best for you'. Practice three times daily!

HAND-OUT # 2

SENIOR HEALTH AND PEER COUNSELING CENTER Genevieve Meyer, Ph.D.

PAIN MANAGEMENT WORKSHOP

I. Introducing an Integral Medicine (Holistic) Approach to Pain
HOMEWORK ASSIGNMENTS: Practice the Relaxation Response 3 times daily.

II. Learning to RECOGNIZE THE PAIN-TENSION-PAIN-SPIRAL
ADD TO HOMEWORK ASSIGNMENTS: Start becoming aware of early build-up of the PAIN-TENSION-PAIN-SPIRAL. Practice reversing it throughout the day by GIVING YOUR BODY THE SIGNAL TO RELAX AND ALLOWING YOUR SELF TO SHIFT INTO A DEEPER BREATH RHYTHYM.

III. Learning to Control Pain Through Mental Imagery
ADD TO HOMEWORK ASSIGNMENTS: Three times a day, practice the "Release of Pain" Mental Imagery afte_ doing TEN MINUTES of the Relaxation Response.

IV. Substituting Pleasure for Pain
ADD TO HOMEWORK ASSIGNMENTS: BEGIN TO INCREASE THE AMOUNT OF PLEASURE IN EACH DAY by doing more thangs from your "TEN THINGS THAT MAKE ME FEEL JOY LIST". Remember to continue to practice the Relaxation Response Mental Imagery three times a day.

V. Learning to Identify Variations and Differences in your Pain Patterns.
ADD TO HOMEWORK ASSIGNMENTS: Keep a Daily Comfort Log, OR START A JOURNAL OF YOUR "HIGH PAIN EPISODES" AND YOUR FEELING BETTER TIMES.

VI. Learning to Cooperate with Your Body
ADD TO HOMEWORK ASSIGNMENTS: Begin using your own Inner Body Wisdom to guide you into "going with the flow of your body" rather than pushing it. Start to make changes in your daily living patterns, based on your insights from your Daily Logs or your JOURNAL ENTRIES.

VII. Learning to BALANCE THE MIND-BODY EFFECT
ADD TO HOMEWORK ASSIGNMENTS: Begin keeping a record in your journal or notebook of what works best for you. BE AS SPECIFIC AS POSSIBLE.

VIII. Setting Wellness Goals: Physical Exercise and Nutrition
ADD TO HOMEWORK ASSIGNMENTS: (1) Build a program of movement therapy, appropriate to your physical condition, as well as your own insights into what your body needs. (2) After reading the hand-out on nutrition, make any changes in your diet that seem appropriate to you.

IX. Setting Wellness Goals: Making Room for an Increase in Creative and Social Activities. ADD TO HOMEWORK ASSIGNMENTS: Begin using your Inner Wisdom or Journal or Log techniques to discover what activities would be stimulating and nurturing for you.

X. EVALUATING YOUR GAINS AND SETTING GOALS FOR CONTINUING PROGRESS
FINAL ASSIGNMENT: Make a commitment to keep on practising your own Pain Management program, either on your own or as you continue on into the Growth Group. TRUST YOURSELF!

HAND-OUT #3